PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001														
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER THAN SMALL ENTITY		
TOTAL CLAIMS								RATE	Ξ.	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE		OR	BASIC FEE		
то	TAL CHARGEA	BLE CLAIMS	minus 20=		*			X\$ 9:	=		OR	X\$18=		
IND	EPENDENT CL	AIMS			*			X42=				X84=		
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT								OR			
* If the difference in column 1 is less than zero, enter "0" in column 2								+140=			OR	+280=		
								TOTA	L		OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY						
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	* 12	Minus	** 2	.D	=		X\$ 9=	= [OR	X\$18=		
	Independent	* 5	Minus	***	3	= 2		X42=			OR	X8 4 €		
	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDENT	CLAIM		ľ	+140=				+280=		
							ı	TOT			OR	TOTAL	172	
		(Column 1)		(Colur	mn 21	(Column 3)	-	ADDIT. FI	EE		OR	ADDIT. FEE	115	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=	-		OR	X\$18=		
	Independent	*	Minus	***		=		X42=		<u></u>	OB	X84=		
Ľ	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM		1	+140=	=		OR	+280=		
							-	TOT. ADDIT. FI			OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colu		(Column 3)								
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=	-		OR	X\$18=		
	Independent	*	Minus	***	- 0	-		X42=	1		OR	X84=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											,000		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280= TOTAL			
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE												ADDIT. FEE		
	The "Highest Nun	nber Previously Pa	id For" (Total o		-	-	r fou	ind in the	арр	ropriate box	x in co	lumn 1.		

Application or Docket Number